

FORM PTO-1390 (Modified) U.S. PATENT AND TRADEMARK OFFICE; U.S. DEPARTMENT OF COMMERCE
(REV. 12-2004)

ATTORNEY'S DOCKET NUMBER

294-207 PCT/US

U.S. APPLICATION NO. (If known, see 37 CFR 1.5)

10/521126

INTERNATIONAL APPLICATION NO. PCT/NL2003/000519	INTERNATIONAL FILING DATE 16 July 2003	PRIORITY DATE CLAIMED 16 July 2002
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TITLE OF INVENTION

Biodegradable Phase Separated Segmented Multi Block Co-Polymers

APPLICANT(S) FOR DO/EO/US

Catharina Everdina Hissink; Ronald Meyboom; and Theodorus Adrianus Cornelius Flipsen

Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:

1. This is a **FIRST** submission of items concerning a submission under 35 U.S.C. 371.
2. This is a **SECOND** or **SUBSEQUENT** submission of items concerning a submission under 35 U.S.C. 371.
3. This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (24) indicated below.
4. The US has been elected (Article 31).
5. A copy of the International Application as filed (35 U.S.C. 371 (c)(2))
 - a. is attached hereto (required only if not communicated by the International Bureau).
 - b. has been communicated by the International Bureau.
 - c. is not required, as the application was filed in the United States Receiving Office (RO/US).
6. An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).
 - a. is attached hereto.
 - b. has been previously submitted under 35 U.S.C. 154(d)(4).
7. Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))
 - a. are attached hereto (required only if not communicated by the International Bureau).
 - b. have been communicated by the International Bureau.
 - c. have not been made; however, the time limit for making such amendments has NOT expired.
 - d. have not been made and will not be made.
8. An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).
9. An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).
10. An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).
11. A copy of the International Preliminary Examination Report (PCT/IPEA/409).
12. A copy of the International Search Report (PCT/ISA/210).

Items 13 to 23 below concern document(s) or information included:

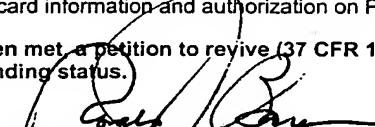
13. An Information Disclosure Statement under 37 CFR 1.97 and 1.98.
14. An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.
15. A **FIRST** preliminary amendment.
16. A **SECOND** or **SUBSEQUENT** preliminary amendment.
17. A substitute specification.
18. A power of attorney and/or change of address letter.
19. A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.
20. A second copy of the published International Application under 35 U.S.C. 154(d)(4).
21. A second copy of the English language translation of the International Application under 35 U.S.C. 154(d)(4).
22. Express Mail Label No. EL 769581304 US
23. Other items or information:

EXPRESS MAIL CERTIFICATE

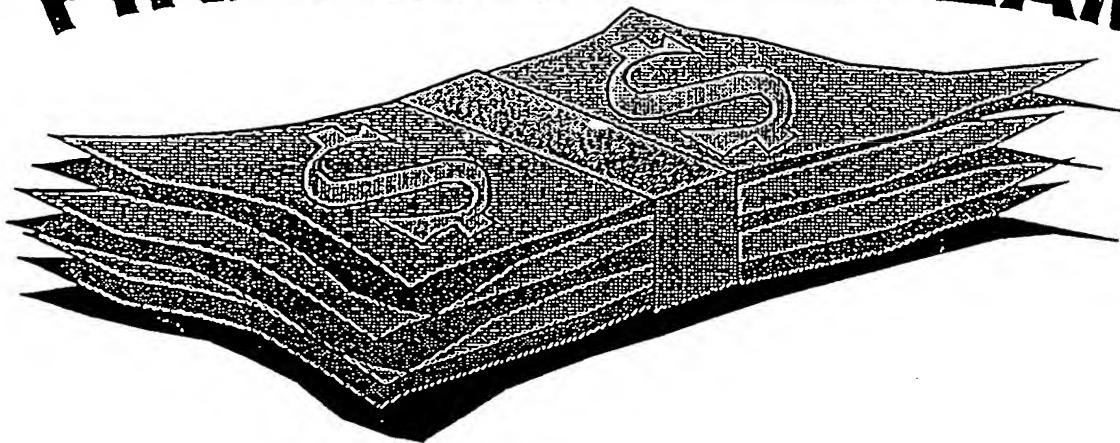
Date: 12 Jan 2005 Label No. EL 769581304 US
 I hereby certify that on the date indicated above, I deposited this paper or fee with the U.S. Postal Service and that it was addressed for delivery to Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450 by "EXPRESS MAIL" Post Office to Addressee Service.

Joan M. Irving
Name (P.I.M.)Joan M. Irving
Signature

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. APPLICATION NO. (if known, see 37 CFR 1.5) 10/521126		INTERNATIONAL APPLICATION NO. PCT/NL2003/000519		ATTORNEY'S DOCKET NUMBER 294-207 PCT/US	
24. The following fees are submitted:				Applicant use	Office use
<input checked="" type="checkbox"/> a) Basic national fee \$300.00				\$ 300.00	
<input checked="" type="checkbox"/> b) Examination fee \$200.00				\$ 200.00	
<input checked="" type="checkbox"/> c) Search fee \$500.00				\$ 500.00	
TOTAL OF ABOVE CALCULATIONS = \$1000.00				\$ 1,000.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole)		RATE	
42 - 100 =	0 /50 =	0		x \$250.00	\$ 0.00
Surcharge of \$130.00 for furnishing the oath or declaration later than months from the earliest claimed priority date (37 CFR 1.492(e)).				\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	30 - 20 =	10	x \$50.00	\$ 500.00	
Independent claims	1 - 3 =	0	x \$200.00	\$ 0.00	
MULTIPLE DEPENDENT CLAIMS (if applicable) <input type="checkbox"/> + \$360.00				\$ 0.00	
TOTAL OF ABOVE CALCULATIONS =				\$ 1,500.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.				\$ 0.00	
				SUBTOTAL =	\$ 1,500.00
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				\$ 0.00	
				TOTAL NATIONAL FEE =	\$ 1,500.00
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40 per property +				\$ 0.00	
				TOTAL FEES ENCLOSED =	\$ 1,500.00
Amount to be refunded:					\$
Amount to be charged:					\$
a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>\$1,500.00</u> to cover the above fees is enclosed. b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of _____ to cover the above fees. A duplicate copy of this sheet is _____ c. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>08-2461</u> . A duplicate copy of this sheet is enclosed. d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.					
SEND ALL CORRESPONDENCE TO:					
Ronald J. Baron, Esq. Hoffmann & Baron, LLP 6900 Jericho Turnpike Syosset, New York 11791 United States of America Telephone: 516-822-3550/Facsimile: 516-822-3582					
 SIGNATURE Ronald J. Baron NAME 29,281 REGISTRATION NUMBER					

SPECIAL REQUEST FOR FINANCE/RAM TEAM



TO: PCT RAM TEAM CP2/5TH FLOOR

PLEASE PROCESS THE FOLLOWING ADJUSTMENTS:

FROM

TO

CODE

Fee Amount

CODE

Fee Amount

16321

500

1642

400

ER:

THE ORIGINAL METHOD OF PAYMENT WAS

CHARGE VOUCHER IS ATTACHED TO CHARGE/REFUND
ADDITIONAL FEES

BY A CHECK

OTHER: _____

BY A CHARGE TO DEPOSIT ACCOUNT NO. 08-3461

REQUESTED BY:

Lerry M. Johnson

DATE:

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____

2 Serial/Patent # 10/521,126

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
✓ Filing			\$ 102)
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$

7 TOTAL AMOUNT OF REFUND \$ 102)

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 0 8 -- 2 4 6 1

10 REASON:

✓ Overpayment

Duplicate Payment

No Fee Due (Explanation):

Rate change - 08 Dec 2004 -

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:

SIGNATURE: *Larry M. Johnson*

OFFICE: *DO/ED*

TITLE: *Supervisor*

PHONE: *703-308-9140*

X221

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B